### NASA HEALTH PROMOTION AND WELLNESS COMMITTEE

Minutes for: March 8, 2007

**Attendance:** "X" means present

ARC	X	HQ		DFRC	
JPL		DYN	$\mathbf{X}$	GSFC	$\mathbf{X}$
JSC	X	KSC		MSFC	
GRC	X	SSC	X	WFF	
LRC	X	MAF	X	WSTF	X

Welcome Mae Hafizi

For your convenience, minutes are color coded. Any thing in red requires attention and/or feedback from you.

Today's guest speakers and topic:

The Occupational Medicine staff of Michoud Assembly Facility (MAF) will present

 Employee-Centered Health and Wellness: Present and future challenges at MAF

# HPW Communication- Health Promotion Update

Mae Hafizi

# Mayo Clinic EmbodyHealth

The *Mayo Clinic EmbodyHealth* web portal and the HRA were simultaneously launched on January 30, 2007. The product is available to all NASA Civil Servants (CS) as well as all the Occupational Health Contractors including managers, field and support staff.

The *Mayo Clinic EmbodyHealth* is truly one of the very few mechanisms we have to include the family members. Please inform the employees that their spouse or significant other and all children over the age of 18 can utilize the site. This is true for the CS and the contractor population.

The first 1,000 NASA CS who complete the HRA will receive an incentive (Four small items) if they agree to completing the online offer form with Mayo Clinic. To date, we have had \_1779\_ registrations and \_949\_ completed HRAs. About ¼ of the incentives have been packaged and sent. In speaking with Mayo Clinic, we have learned that based on their book of business, with our type of incentive, they predict a 20% registration rate. We are at \_12%\_. Therefore, in order to meet at least 20% registration we have to really push the product out to the employee population. Please use every vehicle practical to your center operations to advertise the campaign, especially the effort to get the Mayo unique ID (healthiernasa) to eligible employees.

Please keep in mind that in order to provide you with Center specific data, your Center must have at least 50 completed HRAs. Currently, six Centers are not meeting this requirement.

In the month of June, about five months into the initiative, we will share the stats with you during our regularly scheduled ViTs on Wednesday June 6, 2007.

The five-minute promotional video that was created by the multi-media folks at HQ was shown. A copy of the video was mailed to all Medical COTRs on Tuesday March 6, 2007. The video is also available for down load on our website at <a href="http://ohp.nasa.gov/embodyhealth/downloadpromo.html">http://ohp.nasa.gov/embodyhealth/downloadpromo.html</a>. Please review download instructions very carefully.

Before ending the discussion on *Mayo Clinic EmbodyHealth* I like to mention once again that the success of this initiative, as it is with any other, depends on your efforts and center specific promotion. I hope the video is helpful, if necessary, let me know and we'll provide you with more Butterfly posters. Consider folding the HRA into your Health Maintenance Exam for this year. If you like we can start a little competition among ourselves to see which Center get the most HRA completed. Please think about these suggestions.

# **Health and Productivity Goldbook**

In December 2005 we had a speaker on the topic of health and productivity. As a result of that presentation with purchased the GoldBook on productivity instruments. The book is available for download from our website:

## Presentation:

http://ohp.nasa.gov/disciplines/hpromo/hpwTeam/meetings/presentations/2005-12\_pres.pdf

# GoldBook:

www.ohp.nasa.gov/disciplines/hpromo/private/gold\_book.pdf.

Access requires the following information:

User name: hpromo Password: hnasa

#### Final influenza data

The following influenza data is incomplete as it is missing information from one of the 14 Centers. As it stands you vaccinated 19,502 employees vs. 14,912 the previous year. That is an increase of 23% as a direct result of your outreach activities. Last year 27.5% of the eligible population was vaccinated vs. this year where 31% was vaccinated. Thank you.

## Healthier You 2008 Calendar

We have only had 36 online evaluations completed on the *HealthierYou 2007* calendar. We would like more however. We have begun developing next year's calendar. The focus of 2008 will be healthy aging and stress of the many conflicting roles that we have in our complex lives. If you like to be participate in the early review process, please send me an email. We are working on our third draft.

By the way, we learned from the graphics designer, Amy Lombardo, that the *HealthierYou 2007* calendar won the Gold ADDY award for advertisement and design.

# **Annual Occupational Health Conference**

July 23-27, 2008 The Warwick Hotel Denver, Colorado

Theme: Moving toward the summit - Occupational Health Challenges

Due to budgetary constraints, if you are limited to the attendance days please consider the first two:

- •Monday 7/23/07, Medical PDC: 8am-12Noon, Disaster Preparedness-Managing Processes and Resources
- •Monday Medical/EH PDC Combined: 1pm-5pm, Value of OH
- Tuesday 7/24/07 at 10am, The Aging Workforce
- •Tuesday 7/24/07 at 11am, Emerging Infectious Diseases

# Employee-Centered Health & Wellness: Present & future challenges at MAF Presented by: Kathy Eaton CEAP, Patrice Love RN, Troy Hutchins MD

Challenges to the workforce Post Katrina can be summarized as such:

- Personal injuries related to evacuation
- •Newly diagnosed cases of hypertension (HTN) secondary to stress
- •Uncontrolled HTN and Diabetes (DM) associated with consumption of high caloric Meals Ready to Eat (MREs)...also resulting in weight gain
- •Increase cases of Upper Respiratory Infections (URI) related to water damaged homes
- •Increased absences and Leave of Absence (LOA)
- •Long commute time (average of 45-60 minutes each way)
- Sleep disturbance
- •Lack of childcare in the community
- •Personal injury related to home repair such as falling from roof tops and ladders

- Limited community resources such as primary care physicians, Emergency Departments, limited bed capacity at the few hospitals that have reopened, pharmacies.
- •Increased anxiety and depression in the adults as well as their adolescent children
- •Marital issues secondary to separation; spouse and children settled elsewhere for the school year and declined to return due to lack of proper housing, infrastructure, school, lack of friends and a network of family and kin

Actions taken by MAF Occupational Health to continuously address these challenges:

Many NASA Centers assisted such as MSFC, JSC, KSC, JPL and SSC through OCHMO coordination.

- •Clinic was re-opened during the last week in September 2005. The Clinic employees needed to have an increased awareness of the overall emotional state of the returning employees while dealing with their own issues and losses. They needed to be skilled in addressing a variety of mental health needs on an emergent, crisis-oriented, basis.
  - To assist the CISM team was deployed for immediate follow up especially to address the needs of the ride-out team.
  - EAP trained LM operators who were receiving calls from employees.

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- •An immunization campaign was coordinated post Katrina. Annual flu immunization continued and this year, 2006-2007, the campaign was accompanied with a health and wellness survey to better understand the needs of the employees.
  - As a result of the survey Jazzercise, Yoga and Weight Watchers at Work were established.
- Treatment and follow-up on injuries
- •Medical Director provided interim prescriptions to the employees. Locating an operating pharmacy was an issue.
- •OH staff worked as "social workers" trying to identify any available community resources. Some employees did not even have their IDs because they left their homes so suddenly and unprepared.
- •Lockheed Martin (LM) Corporation assisted with housing by renting an entire hotel from October 2005 to January 2006 while other resources was also allocated to assist employees to secure FEMA trailers or another places of residence.
- •Outreach education began in the form of electronic and card copy newsletters that were sent home to the employees especially on the anniversary of Katrina.
- •Leaders and managers of MAF received training from a crisis management specialist.
- Peer Support Critical Incident Seminar was offered through OCHMO
- •JPL provided training on sleep and resilience
- •Moving Forward Discussion Groups was initiated and since have been stopped.

## Operational Challenges faced by MAF Occupational Health

•An increase in the number of older employees retiring

- •An increase in the number of new hires, up to 600 since January 2007
- •The need to coordinate all pre-hire physicals and cert exams with Human Resources
- •Integrating much more counseling time during exams and clinic visit
- •Increase in the number of walk-ins for personal issues because of the limited resources in the community.
- •A change in the scope of services from occupational health to primary due to community limitations.
- •Implementation of LM Corporate initiatives such as smoke-free work site to include smoking cessation programs that includes phone counseling, medication and group therapy.
- Addressing resilience fatigue in employees
- •Continued medical challenges are:
  - o HTN, DM, hyperlipidemia, poor diet with heavy reliance on fast food
  - o Increase in alcohol use/abuse.
  - Misuse of OTC and Rx medications
  - o Increase in mental illness especially depression in men. As men are less distracted with home repair they are beginning to feel the weight of all the issues.
  - Adolescents and the young adults in the family are suffering from moderate to severe depression.

# Actions taken by MAF Occupational Health to address operational challenges

- •EMT staff was transferred from Security to Occupational Health to handle the increase in volume and ever widening scope of services.
- •Increase in health education and awareness outreach in the following areas:
  - o Colon CA program in collaboration with the American Cancer Society
  - Sleep Seminars on site
  - o Chair massage with nominal fee
  - o Personal trainer with nominal fee
  - Revitalizing Michoud Recreation Association
- •Establishing a committee to address effectiveness of health promotion initiatives and to continue center wide need assessment.
- •Place particular focus on how to change the culture at MAF with respect to smoking since all smoking was banned at MAF except for union represented positions.
- New focus on disease management
- •Scheduling was addressed as more time is being devoted to counseling.

Next ViTs is scheduled for June 6. 2007 at 13:00PM Eastern. Dr. Saralyn Mark will speak on the topic of Cervical Cancer and Mayo Clinic EmbodyHealth Statistics will be discussed.